

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>12109</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Theresa</u> <u>J</u> <u>Alderman</u> P.O. Box, Bldg., Room No., if any <u>PO Box 2573</u> Street <u>1216 Kendale Blvd</u> City <u>East Lansing</u> State <u>Michigan</u> ZIP Code + 4 <u>48826-2573</u>	4. Name, file number, and address of labor organization. Name <u>Michigan Education Association</u> Labor Organization File Number <u>512-840</u> P.O. Box, Building and Room Number, if any <u>PO Box 2573</u> Street <u>1216 Kendale Blvd</u> City <u>East Lansing</u> State <u>Michigan</u> ZIP Code + 4 <u>48826-2573</u>
5. Position in labor organization. <u>Staff Attorney</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Theresa J Alderman

On 08/15/2005

Date

517/337-5536

Telephone Number

Name of Person Filing Theresa Alderman

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

9. Business deals with:

☐

a. Labor Organization

☐

b. Trust

☐

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

White, Schneider, Young & Chiodini, PC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

2300 Jolly Oak Road

City

Okemos

State

Michigan

ZIP Code + 4

48865

14.a. Nature of payment.

01/13/04 Lunch w/ M. Shoudy \$25
05/21/04 Dinner w/ J. Donahue \$50
06/02/04 Dinner w/ M. Shoudy in San Diego \$100
06/03/04 Dinner w/ firm in San Diego \$30
06/04/04 Dinner w/ M. Shoudy in San Diego \$100
06/29/04 Lunch w/ various associates \$15
CONT'D

13.b. Is the Business an Employer ☐or Consultant ☒

?

14.b. Amount of payment.

\$320

Name of Person Filing Theresa Alderman

File Number U-

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name White, Schneider, Young & Chiodini, PC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2300 Jolly Oak Road

City Okemos

State Michigan

ZIP Code + 4 48865

14.a. Nature of payment.

CONT'D

09/25/04 Dinner & Show w/ M. Shoudy \$100

10/06/04 Lunch w/ Karen Schneider \$30

10/20/04 White Firm Reception \$20

11/04/04 Dinner & Show w/ M. Shoudy \$100

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$250

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Zausmer, Kaufman, August & Caldwell, PC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 31700 Middlebelt Road, Ste 150

City Farmington Hills

State Michigan

ZIP Code + 4 48334

14.a. Nature of payment.

06/03/04 Dinner w/ firm in San Diego \$30

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$30

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Law Offices of Lee & Clark

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 24901 Northwestern Highway, Ste 113

City Southfield

State Michigan

ZIP Code + 4 48075

14.a. Nature of payment.

06/03/04 Dinner w/ firm in San Diego \$30

11/22/04 Ofc tour & lunch w/ firm \$40

12/16/04 Holiday dinner with firm \$100

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$170

Name of Person Filing Theresa Alderman

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Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name The Firestone Law Firm, PC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 30555 Southfield Road, Suite 530

City Southfield

State Michigan

ZIP Code + 4 48076

14.a. Nature of payment.

06/03/04 Dinner w/ firm in San Diego \$30

12/13/04 Holiday lunch with firm \$30

12/2004 Leather pocket notebook \$15

13.b. Is the Business an Employer

☐

or Consultant

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14.b. Amount of payment.

\$75

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Duby and Associates

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2510 Kerry Street, Suit 210

City Lansing

State Michigan

ZIP Code + 4 48912

14.a. Nature of payment.

12/10/04 Holiday dinner w/ firm \$40

13.b. Is the Business an Employer

☐

or Consultant

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14.b. Amount of payment.

\$40

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Kalniz, Iorio & Feldstein, PPA

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 4981 Cascade Rd. SE

City Grand Rapids

State Michigan

ZIP Code + 4 49546

14.a. Nature of payment.

06-16-04 Dinner w/ K. Durchik \$80

06/03/04 Dinner w/ firm in San Diego \$30

13.b. Is the Business an Employer

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or Consultant

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14.b. Amount of payment.

\$110